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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE 1025 CONNECTICUT AVENUE, N.W. ADDRESS (number and street) **SUITE 1104** Check if different than previously WASHINGTON DC 20036 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00325936 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Χ Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 02 0 1 2010 02 28 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr. Sidney Levitsky Type or Print Name of Treasurer Electronically Filed by Dr. Sidney Levitsky 03 8 0 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

## SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

2/9

Write or Type Committee Name SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) C	ash on Hand January 1 2010 Y Y Y		103352.22
` '	egining of Reporting Period	148518.80	
(c) T	otal Receipts (from Line 19)	3200.00	59020.00
(d) S	ubtotal (add lines 6(b) and		
	(c) for Column A and Lines (a) and 6(c) for Column B)	151718.80	162372.22
. Total D	Disbursements (from Line 31)	11401.18	22054.60
Report	on Hand at Close of ing Period inct Line 7 from Line 6(d))	140317.62	140317.62
the cor	and Obligations owed TO mmittee (Itemize all on ule C and/or Schedule D)	0.00	
the cor	and Obligations owed BY mmittee (Itemize all on ule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 9

Write or Type Committee Name

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

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2 0 1 0

та.

м м 0 2 <sup>D</sup> 28

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:  (a) Individuals/Persons Other		
	Than Political Committees  (i) Itemized (use Schedule A)	2250.00	56900.00
	(ii) Unitemized	950.00	2120.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	3200.00	59020.00
(	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3200.00	59020.00
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3. /	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
t	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
	Transfers from Non-Federal and Levin Funds		
(	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(	(b) Levin Funds (from Schedule H5)	0.00	0.00
(	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3200.00	59020.00
	Fotal Federal Receipts (subtract Line 18(c) from Line 19)	3200.00	59020.00

#### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	1401.18	2554.60
	Expenditures(c) Total Operating Expenditures	1401.16	2334.00
	(add 21(a)(i), (a)(ii) and (b))	1401.18	2554.60
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	10000.00	19500.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
:6.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
(	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	11401.18	22054.60
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	11401.18	22054.60

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating **COLUMN B COLUMN A** Expenditures **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) 3200.00 59020.00 from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d)) ..... 35. Net Contributions (other than loans) 3200.00 59020.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 1401.18 2554.60 (add Line 21(a)(i) and Line 21(b))........ 37. Offsets to Operating Expenditures 0.00 0.00

1401.18

FE6AN026

(from Line 15, page 3) .....

(subtract Line 37 from Line 36) .....

38. Net Operating Expenditures

5/9

2554.60

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 9 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person in the name and address of any political committee to the sold of the sold or used by any person in the sold of the sold or used by any person in the sold of the sold or used by any person in the	
Full Name (Last, First, Middle Initial) Dr. Robert A. Gustafson  Mailing Address P.O. Box 9238  City  Morgantown  FEC ID number of contributing federal political committee.  Name of Employer West Virginia University  Receipt For: Primary General Other (specify)	State Zip Code WV 26505  C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt  0 2 1 6 2 0 1 0  Transaction ID: SA11AI.9728  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Dr. Brian W. Hummel  Mailing Address 8010 Summerlin Lake  City Fort Myers  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For: Primary General Other (specify)	State Zip Code FL 33907  C  Occupation Physician  Aggregate Year-to-Date   500.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Dr. Carlton H. Sheely Mailing Address 4782 Highland Road City Baton Rouge FEC ID number of contributing federal political committee.  Name of Employer CVT Surgical Center Receipt For:	State Zip Code LA 70808  C  Occupation Physician  Aggregate Year-to-Date	Date of Receipt    M M M
Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	1000.00	1750.00

A.

### **SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 7/9 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Dr. Gonzalo M. Vargas Date of Receipt Mailing Address 1207 Meadowlark Lane 02 03 2010 City State Zip Code Transaction ID: SA11AI.9715 Sugar Land TX 77478 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Texas Surgical Associates Occupation Physician Receipt For: Aggregate Year-to-Date Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	500.00
TOTAL This Period (last page this line number only)	<b>•</b>	2250.00

В.

C.

SCHEDULE B (FEC Form 3X)	Line concrete ask = dula/-)	FOR LINE	NUMBER:	PAGE 8/9
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
SOCIETY OF THORACIC SURGEONS PO	DLITICAL ACTION COMM	MITTEE		
Full Name (Last, First, Middle Initial) American Express			Transaction ID: Date of Disbursem	
Mailing Address P.O. Box 53852			02 / 16	2010 <sup>Y</sup>
	State Zip Code		Amount of Each D	isbursement this Period
	AZ 85072			6.50
Purpose of Disbursement Credit Card Fees				0.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate	ment For: Primary General			
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Merchant Services			Transaction ID:  Date of Disbursem	
Mailing Address 7300 Chapman Highway			$\begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix}$	
	State 7in Code		Amount of Fools D	ish was a set this Deviced
,	State Zip Code TN 37920		Amount of Each D	isbursement this Period
Purpose of Disbursement Credit Card Fees				1221.23
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) SunTrust			Transaction ID: Date of Disbursem	ent
Mailing Address 3440 Wisconsin Avenue,	NW		02 19	Y ŽOŽO
	State Zip Code DC 20016		Amount of Each D	isbursement this Period
Purpose of Disbursement	20010	-		173.45
Bank Charges Candidate Name		Category/		
Caldidate Ivanie		Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:	, , , , , <del>,</del>			
SUBTOTAL of Disbursements This Page (optional) .				1401.18

TOTAL This Period (last page this line number only) ......

1401.18

TEMIZED DISBURSEMENTS  for each category of the Detailed Summary Page    21	SCHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)	_	NUMBER: PAGE 9/9
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for the purpose of Disbursement or for committee or for com	ITEMIZED DISBURSEMENTS	for each	category of the '	21b	22 X 23 24 25
NAME OF COMMITTEE (In Full)  NAME OF COMMITT	Any Information copied from such Reports and	Statements may n	ot be sold or used		
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE  Full Name (Last, First, Middle Initial) AMERIPAC: THE FUND FOR A GREATER AMERICA  Mailing Address 607 14TH STREET, NW  City WASHINGTON DC 20005  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City City State: Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB23.9723 Date of Disbursement this Per  Category' Type  Amount of Each Disbursement this Per  Category' Type  Transaction ID: SB23.9726  Amount of Each Disbursement this Per  Category' Type  Amount of Each Disbursement this Per  City MCLEAN  Amount of Each Disbursement this Per  City City Condidate Name  Office Sought: House President State: District:  Disbursement For: Primary General Other (specify) ▼  Transaction ID: SB23.9716  Transaction ID: SB23.9716  Date of Disbursement this Per  Category' Type  Transaction ID: SB23.9716  Date of Disbursement this Per  Category' Type  Transaction ID: SB23.9716  Amount of Each Disbursement this Per  Category' Type  Category' Type  Category' Type  Other (specify) ▼  Transaction ID: SB23.9722  Date of Disbursement this Per  Category' Type  Amount of Each Disbursement this Per  Category' Type  Category' Type  Category' Type  Category' Type  Other (specify) ▼  Category' Type  Category' Type  Other (specify) ▼  Category' Type  Category' Type  Date of Disbursement this Per  Category' Type  Other (specify) ▼  Category' Type  Category	or for commercial purposes, other than using th				
Mailing Address 607 14TH STREET, NW  City WASHINGTON DC 20005 Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE  Mailing Address 6849 OLD DOMINION DRIVE  City City State Zip Code VA 22101  City City State Disbursement CONTRIBUTION Candidate Name  Office Sought: House Primary State District  City City State Zip Code VA 22101  Condidate Name  Office Sought: House Primary Office Sought: House Primary Office Sought: Senate Primary Office Sought: House Primary Office Sought: House Primary Office Sought: Senate Primary Office Sought: House Primary Office Sought: House Primary Office Sought: Senate Primary Office Sought: House Primary Office Sought: Senate Primary Office Sought: Senate Primary Office Sought: House Senate Primary Office Sought: Other (specify) Other (specify)  Other (sp	` '	NS POLITICAL	ACTION COM	MITTEE	
City WASHINGTON Disbursement CONTRIBUTION Candidate Name  Disbursement Cother (specify)  Full Name (Last, First, Middle Initial) Purpose of Disbursement Contribution Candidate Name  Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE  City MCLEAN VA 22101  Purpose of Disbursement Contribution Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial) President State: District:  Full Name (Last, First, Middle Initial) President State: Disbursement Contribution Candidate Name  Disbursement Other (specify)  Type  Transaction ID: SB23.9716 Date of Disbursement Disbursement Disbursement Contribution Candidate Name  Disbursement Other (specify)  Type  Transaction ID: SB23.9722 Date of Disbursement Disbursement Disbursement Other (specify)  Transaction ID: SB23.9722 Date of Disbursement Disburs					Transaction ID: SB23.9723
City WASHINGTON DC 20005  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial) Purpose of Disbursement Contribution Candidate Name  Office Sought: House Senate Primary General Prim					
WASHINGTON Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE  Mailing Address 6849 OLD DOMINION DRIVE  City State Zip Code VA 22101  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: House Senate Primary General District:  Full Name (Last, First, Middle Initial) Purpose of Disbursement Contribution Candidate Name  City Senate Primary General Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB23.9716  Amount of Each Disbursement this Perinary General Other (specify) ▼  Transaction ID: SB23.9722  Disbursement For: Senate Primary General Other (specify) ▼  Transaction ID: SB23.9722  Date of Disbursement  Senate Primary General Other (specify) ▼  Transaction ID: SB23.9722  Date of Disbursement  Disbursement  Disbursement For:  Category' Type  Transaction ID: SB23.9722  Date of Disbursement  Dis		, NW			02 15 2010
Contribution  Candidate Name  Office Sought: House Senate President State: District: Senate President State: District: Senate President State: District: Pull Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City Senate President State: Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement Contribution Candidate Name  Office Sought: State Zip Code VA 22101  Transaction ID: SB23.9716  Date of Disbursement Date of Disbursement Tor: Senate Primary General Disbursement For: Senate Primary General District: Type  Office Sought: State: District: Primary General Disbursement For: Senate Primary General District: Type  Office Sought: X House Disbursement For: 2010 Category/ Type  Office Sought: X House Primary General Disbursement For: 2010 Primary General Disbursement Type  Office Sought: X House Disbursement For: 2010 Primary General Disbursement Type  Office Sought: X House Disbursement For: 2010 Primary General Disbursement Type  Office Sought: X House Disbursement For: 2010 Primary General Disbursement Type  Other (specify) ▼					Amount of Each Disbursement this Period
Office Sought: House Senate Primary General Other (specify) ▼  State: District: Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE  Mailing Address 6849 OLD DOMINION DRIVE  City State Zip Code VA 22101  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: House Primary General President Other (specify) ▼  Full Name (Last, First, Middle Initial) Sourcement For: Senate Primary General President Other (specify) ▼  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code NJ 07740  Purpose of Disbursement CONTRIBUTION Candidate Name Category/ Type  City City State Zip Code NJ 07740  Purpose of Disbursement Contribution Candidate Name Category/ Type  Condidate Name Category/ Type  City City State Zip Code NJ 07740  Purpose of Disbursement Contribution Candidate Name Primary General President Other (specify) ▼ 2500.00  Candidate Name Category/ Type					2500.00
Office Sought:	Candidate Name				
State: District: Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COMMITTEE  Mailing Address 6849 OLD DOMINION DRIVE  City State Zip Code VA 22101  Purpose of Disbursement CONTRIBUTION Candidate Name  Disbursement For: Senate Primary General Other (specify) ▼  State: District: District: District: District: Disbursement CONTRIBUTION  City State Zip Code VA 22101  Transaction ID: SB23.9716  Amount of Each Disbursement this Per Category' Type  Transaction ID: SB23.9722  Date of Disbursement this Per Category' Type  Amount of Each Disbursement this Per Category' Type  Transaction ID: SB23.9722  Date of Disbursement this Per Category' Type  Amount of Each Disbursement Disbursement Contribution Category' Type  Transaction ID: SB23.9722  Date of Disbursement this Per Category' Type  Transaction ID: SB23.9722  Date of Disbursement this Per Category' Type  Transaction ID: SB23.9722  Date of Disbursement this Per Category' Type  Transaction ID: SB23.9722  Date of Disbursement this Per Category' Type  Office Sought: X House Senate President Senate Primary Ageneral Other (specify) ▼  State: NJ District: 06	Senate	Primary		71	
BLUE DOG POLITICAL ACTION COMMITTEE  Mailing Address 6849 OLD DOMINION DRIVE  City	State: District:		<i>,</i> •		
City City Condidate Name  City Condidate Name  City Condidate Name  City Condidate Name  City LONG BRANCH  Condidate Name  City LONG BRANCH  Condidate Name  City Condidate Name  City LONG BRANCH  Condidate Name  City Condidate Name  City Condidate Name  City LONG BRANCH  Condidate Name  Condidate Name  Condidate Name  Condidate Name  City Condidate Name  Condidate Name  Condidate Name  FRANK PALLONE  Office Sought: X House Senate Primary General  Condidate Name  FRANK PALLONE  Office Sought: X House Senate Primary General  Condidate Name  FRANK Pallone  Other (specify) ▼  Amount of Each Disbursement this Pen  Amount of Each Disbursement this Pen  Category/ Type  Cotagory/ Type  Other (specify) ▼  State NJ District: 06	· · · · · · · · · · · · · · · · · · ·	MMITTEE			
MCLEAN  Purpose of Disbursement CONTRIBUTION  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH NJ 07740  Purpose of Disbursement CONTRIBUTION Candidate Name FRANK PALLONE  Office Sought: X House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Per Senate Primary X General Other (specify) ▼  State: NJ District: 06	Mailing Address 6849 OLD DOMINI	ON DRIVE			$\begin{bmatrix}\begin{smallmatrix}M\\02\end{smallmatrix}^M&\begin{smallmatrix}/&D&03\end{smallmatrix}^D&\begin{smallmatrix}/&Y&Y&Y&Y\\2010\end{smallmatrix}^Y$
MCLEAN  Purpose of Disbursement CONTRIBUTION  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH  Purpose of Disbursement CONTRIBUTION  Candidate Name FRANK PALLONE  Office Sought: X House Senate Primary Ageneral Other (specify) ▼  Category/ Type  Amount of Each Disbursement this Per  Category/ Type  Office Sought: X House Senate Primary Ageneral Other (specify) ▼  State: NJ District: 06	City	State	Zip Code		Amount of Each Disbursement this Perio
CONTRIBUTION Candidate Name  Office Sought: House Senate Primary General Other (specify) President State: District:  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH NJ 07740  Purpose of Disbursement CONTRIBUTION Candidate Name FRANK PALLONE  Office Sought: X House Senate Primary General Other (specify) Amount of Each Disbursement this Persident Senate Primary General Other (specify) Type  Office Sought: X House Senate Primary General Other (specify) Type  State: NJ District: 06		VA			5000.00
Office Sought: House Senate Primary General Primary General President State: District:  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH NJ 07740  Purpose of Disbursement CONTRIBUTION Candidate Name FRANK PALLONE  Office Sought: X House Primary X General Primary X General Other (specify) ▼  State: NJ District: 06	•				5000.00
Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH NJ 07740  Purpose of Disbursement CONTRIBUTION  Candidate Name FRANK PALLONE  Office Sought: X House Senate Primary General Other (specify) ▼  State Zip Code NJ 07740  Category/ Type  Office Sought: X House Senate Primary X General Other (specify) ▼  State: NJ District: 06	Candidate Name				
Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS  Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH NJ 07740  Purpose of Disbursement CONTRIBUTION Candidate Name FRANK PALLONE  Office Sought: X House Senate Primary X General President State: NJ District: 06  Transaction ID: SB23.9722 Date of Disbursement   Amount of Each Disbursement this Period Category/ Type  Category/ Type  Other (specify)   Other (specify)	Senate President	Primary			
Mailing Address P.O. BOX 3176  City State Zip Code LONG BRANCH NJ 07740  Purpose of Disbursement CONTRIBUTION Candidate Name FRANK PALLONE  Office Sought: X House Senate Primary X General President Other (specify) ▼  State: NJ District: 06  State Zip Code NJ 07740  Amount of Each Disbursement this Period 10 10 10 10 10 10 10 10 10 10 10 10 10	Full Name (Last, First, Middle Initial)				
LONG BRANCH  Purpose of Disbursement CONTRIBUTION  Candidate Name FRANK PALLONE  Office Sought:					
Purpose of Disbursement CONTRIBUTION Candidate Name FRANK PALLONE  Office Sought:					Amount of Each Disbursement this Perio
Candidate Name FRANK PALLONE  Office Sought:	Purpose of Disbursement	INJ	07740		2500.00
Office Sought: X House Senate Primary X General Other (specify) ▼  State: NJ District: 06	Candidate Name				
State: NJ District: 06	Office Sought: X House D	Primary	X General	. 140	
10000 00		Other (spe	ecity) 🔻		
SUBTOTAL of Disbursements This Page (optional)					10000 00
	SUBTOTAL of Disbursements This Page (op	tional)		<u> </u>	10000.00